

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HHS		60-22-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	US	242	11/19/01
RESPONSE FORMALITY REVIEW	HC	712	03-19-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

BEST AVAILABLE COPY

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If more than 150 claims or 10 actions
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533
 03-19-02